a war-footing"; which appeared in Indian Express dated 25th March, 1992.

Surveilance for detecting HIV infections among groups practising at risk behaviour was initiated in October, 1985. As on 1st April, 1992, 7272 persons practising at risk behaviour were found to be positive out of a total number of 13,48,965 persons screened.

There are no reliable estimates regarding the prevalence of HIV infection in the general population.

(e) The Government started implementation of the AIDS Control Programme from 1987. The following activities for prevention and control of AIDS have been undertaken so far :—

— Organising a surveillance system for determining the prevalence and infectivity trends in groups practising high risk behaviour.

— Promoting safety of blood and blood products by establishment of testing facilities for screening of blood in blood banks on a zonal basis.

— Health Education.

— Formulation of guidelines for hospital infection control.

— Strengthening of 13 regional hospitals and training of cliniciane and para medical staff in diagnosis and management of HIV infected patients.

— Implementing focussed activity plans in States/UTs where a relatively larger number of HIV infected persons have been detected on the basis of surveillance.

A comprehensive project for prevention and control of AIDS has been cleared by World Bank and World Bank has agreed to provide assistance of Rs. 229.5 crores cut of the total outlay of Rs. 270 crores c f the project. The National AIDS Control I project will be implemented as a centrally sponsored scheme. Project activities will be undertaken in the following areas :—

— Condoms promotion
— Blood safety
— Control of sexually transmitted disease
— Information, education and communication
— Surveillance
— Case management
— Programme management

Two Child Norm

212. MISS SAROJ KHAPARDE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to the answer to Unstarred Question 234 given in the Rajya Sabha on 26th February, 1992 and state:

(a) whether the modalities for implementation of the suggestion that the acceptance of the two child norm be made obligatory for eligibility for any elected office, prospectively and not retrospectively, have since been worked out;

(b) if so, what are the details thereof; and

(c) if not, by when Government are likely to work out the modalities in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARADEVI SIDDHARTHA): (a) and (b) The modalities for implementation of the suggestion that the acceptance of the two child norm be made obligatory for eligibility for any elected office, prospectively and not retrospectively, are still being worked out.

(c) No precise indication can be given at this stage about the timeframe required for working out the modalities involved in the matter.